

APPLICATION FOR A FLORIDA BIRTH RECORD

Florida Department of Health in Seminole County
Office of Vital Statistics

(407) 665-3226

400 West Airport Blvd. Sanford, Florida 32773

Requirement for ordering: If applicant is self, parent, guardian, or legal representative, then the applicant must complete this application and provide valid photo identification. Legal guardian must provide recent court order or recent guardianship paperwork. If a mail request, a copy of the valid photo identification must be provided. If applicant is not one of the above, the Affidavit to Release a Birth Certificate must be completed by an authorized person, copy of grantors ID as well as requestors ID in addition to this application form. Acceptable forms of identification are the following: Driver's License, State Identification Card, Passport, and/or Military Identification Card.

	SECTIO	ON A: REGISTRANT INFO	ORMATION		
FULL NAME AS SHOWN ON BIRTH RECORD	FIRST	MIDDLE		LAST (including any suffix)	
DATE OF BIRTH	MONTH / DAY / YEAR			SEX	
PLACE OF BIRTH	HOSPITAL	CITY O	R TOWN	COUNTY	
MOTHER'S / PARENT'S NAME	FIRST	MIDDLE		LAST NAME (MAIDEN)	
FATHER'S / PARENT'S NAME	FIRST	MIDDLE		LAST (including any suffix)	
	IN	<u> </u>	TION		
	tial information from any Vital Record		ourposes, commits a felon	382, Florida Statutes, or on any application or y of the third degree, punishable as provided in	
	SECTION B: APPLICAN	T INFORMATION (adult r	equesting birth certificat	е)	
Applicant's Name	FIRST	MIDDLE LAST			
TYPE OR PRINT					
M	AILING ADDRESS	CITY		ZIP	
PHONE NUMBER	RELATIONSHIP TO F	RELATIONSHIP TO REGISTRANT		SIGNATURE OF APPLCANT	
()					
	E BAR PROFESSIONAL LICENSE N			EIR RELATIONSHIP TO REGISTRANT	
SECTION C: FEES ↓ METHOD C	of PAYMENTS → WE ACCEP of mail Cash, only acceptable when	T CASH, VISA, MASTER(paving at our location -			
	, , ,	Cost	Quantity	Total	
Certified Copy		\$15.00	1	\$15	
Additional Certified Copies (of same record)		\$8.00		\$	
Plastic Covers for Certificates (optional)		\$3.00		\$	
1-2 Days → Fed EX Delivery (optional)		\$20.00		\$	
,	(op)	Ψ=0.00			
			Total Due:	\$	
	Credit Card inf	ormation - Whe i	n Mailing Only \		
Credit Card Number		Exp Date			
Name of Card Holder	lolder Signature		nature		

INFORMATION AND INSTRUCTIONS FOR BIRTH RECORD APPLICATION

COMPUTER CERTIFICATION: computer certifications are accepted by all state and federal agencies and used for any type of travel.

A computer certification has two different formats:

- 1. A certification of a registered birth (2004 to present), supplies the following facts of birth: Child's Name, Date of Birth, Sex, Time, Weight, Place of Birth (City, County and Location) and Parents' Information.
- 2. A certification of a registered birth (1930 to 2003), supplies the following facts of birth: Child's Name, Date of Birth, Sex, County of Birth and Parents' Name.

AVAILABILITY: Birth registration was not required by state law until 1917, but there are some records on file dating back to 1865.

ELIGIBILITY: Birth certificates can be issued only to:

- 1. Registrant (the child named on the record) if of legal age (18)
- 2. Parent(s) listed on the Birth Record
- 3. Legal guardian (must provide guardianship papers)
- 4. Legal representative of one of the above persons
- 5. Other person(s) by court order (must provide recorded or certified copy of court order)

In the case of a deceased registrant, upon receipt of the death certificate of the decedent, a certification of the birth certificate can be issued to the spouse, child, grandchild, sibling, if of legal age, or to the legal representative of any of these persons as well as to the parent.

Any person of legal age may be issued a certified copy of a birth record (except for those birth records under seal) for a birth event that occurred over 100 years ago.

<u>BIRTH RECORDS UNDER SEAL</u>: Birth records under seal by reason of adoption, paternity determination or court order cannot be ordered in the usual manner. For a record under seal, write to:

BUREAU OF VITAL STATISTICS ATTN: Records Amendment Section P.O. BOX 210 Jacksonville, FL 32231-0042

REQUIREMENT FOR ORDERING: If applicant is self, parent, legal guardian or legal representative, the applicant must provide a completed application along with valid photo identification, if a mail request, a copy of the valid photo identification must be provided. If legal guardian, a copy of the appointment orders must be included with the request. If legal representative, the attorney bar number, and a notation of whom the attorney represents and that person's relationship to the registrant must be included with your request. If you are an agent of local, state or federal agency requesting a record, indicate in the space provided for "relationship" the name of the agency. Acceptable forms of identification are the following: Driver's License, State Identification Card, Passport and/or Military Identification Card.

If not one of the above, you must complete this application and have a notarized Affidavit to Release A Birth Certificate (DH Form 1958, 08/2010) submitted with your application for the birth record along with a copy of the registrant's valid photo identification as well as the applicant's valid photo identification.

<u>RELATIONSHIP TO REGISTRANT</u>: A person ordering his or her own certificate should enter "SELF" in this space. Also, explain if name has been changed; married name, name changed legally (when and where), etc. Others must identify themselves clearly as eligible (see ELIGIBILITY above).

NONREFUNDABLE: Vital record fees are nonrefundable.

APPLICANT'S SIGNATURE: Is required, as well as his/her printed name, residence address and telephone number.

Mail this application with Payment to:

Florida Department of Health in Seminole County

Office of Vital Statistics

400 W. Airport Blvd Sanford, FL 32773

Hours of Operations: Monday thru Friday 8:00 - 4:15 - Last application accepted is at 4:00 pm

http://seminole.floridahealth.gov

When mailing - We accept: VISA, MASTERCARD, DISCOVER & MONEY ORDER

Money Order → Payable to Vital Statistics